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CONFIRMATION NO. 2326

<b>SERIAL NUMBER</b> 09/627,237	<b>FILING OR 371(c) DATE</b> 07/27/2000 <b>RULE</b>	<b>CLASS</b> 375	<b>GROUP ART UNIT</b> 2631	<b>ATTORNEY DOCKET NO.</b> PHA 23,836
<b>APPLICANTS</b> Srihari Adireddy, Ithaca, NY; Lang Tong, Ithaca, NY;  <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/165,321 11/12/1999  <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/13/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 23
			<b>INDEPENDENT CLAIMS</b> 3	
<b>ADDRESS</b> 24737				
<b>TITLE</b> SYSTEM AND METHODS FOR PRECURSOR CANCELLATION OF INTERSYMBOL INTERFERENCE IN A RECEIVER				
<b>FILING FEE RECEIVED</b> 744	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	